

16085 U.S. PTO
121503

Atty. Dkt. No. 029488-0112

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Jay Bua
Title: REDUCTION OF BREAST DENSITY WITH 4-HYDROXY
TAMOXIFEN
Appl. No.: Unassigned
Filing Date: December 15, 2003
Examiner: Unknown
Art Unit: Unknown

031354 U.S. PTO
10/734644
121503

UTILITY PATENT APPLICATION
TRANSMITTAL

Mail Stop PATENT APPLICATION
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Jay Bua
Oakton, Virginia

☐ Applicant claims small entity status under 37 CFR 1.27.

Enclosed are:

- ☒ Specification, Claim(s), and Abstract (31 pages).
- ☒ Formal drawings (1 sheets, Figures 1).
- ☐ Declaration and Power of Attorney (___ pages).
- ☐ Assignment of the invention to Ascend Therapeutics, Inc..
- ☐ Small Entity statement.

☒ Application Data Sheet (37 CFR 1.76).

☐ Claim for Convention Priority.

The filing fee is calculated below:

	Claims as Filed		Included in Basic Fee		Extra Claims		Rate		Fee Totals
Basic Fee							\$770.00	=	\$770.00
Total Claims:	12	-	20	= 0	x		\$18.00	=	\$0.00
Independents:	1	-	3	= 0	x		\$86.00	=	\$0.00
If any Multiple Dependent Claim(s) present:					+		\$290.00	=	\$0.00
Surcharge under 37 CFR 1.16(e) for late filing of Executed Declaration and late payment of filing fee					+		\$130.00	=	\$130.00
							SUBTOTAL:	=	\$900.00
<input type="checkbox"/> Small Entity Fees Apply (subtract 1/2 of above):								=	\$0.00
							TOTAL FILING FEE:	=	\$900.00

☐ A check in the amount of \$0.00 to cover the filing fee is enclosed.

☒ The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.

☐ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date

15 December 2003

By

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